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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			740819-474		
CERTIFICATE OF MAILING	In re Application of Masaaki NODA et al.				
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope	Application Number 09/736,230			Filed 12/15/2000	
addressed to Commissioner for Patents, Washington, DC 20231, on March 27, 2003.	For HIGH-VOLTAGE SEMICONDUCTOR DEVICE				
Name: Jeannie Saxton	Group Art Unit 2815		Examiner Joseph		n
This is a request under the provisions reply in the above identified applicati		xtend the period	for filing a		
The requested extension and appropri (check time period desired):	iate non-small-entity fee	are as follows			
One month (37 CFR 1.1	17(a)(1)) - (\$55/\$110)			\$	
☐ Two months (37 CFR 1	.17(a)(2)) - (\$210/\$420)			\$	
Three months (37 CFR	1.17(a)(3)) - (\$475/\$950	)		\$	950.00
☐ Four months (37 CFR 1	.17(a)(4)) - (\$740/\$1480	)		. \$	
Five months (37 CFR 1	.17(a)(5)) - (\$9005/\$201	0)		\$	
Applicant claims small entity sta above is reduced by one-half, and			e amount shov	vn	
☐ A check in the amount of the fee	is enclosed.				
☐ Payment by credit card. Form P	TO-2038 is attached.				
☐ The Commissioner has already b application to a Deposit Account		fees in this			7.0
The Commissioner is hereby aution or credit any overpayment, to De I have enclosed a duplicate copy	posit Account Number _		required,		DEC-9 2003 C 2500 WAIL ROOM
I am the applicant/inventor					AL M
assignee of record of the Statement under 37	e entire interest. See 37 (CFR 3.73(b) is enclosed		B/96).		ROOM
attorney or agent of reco	ord.				
attorney or agent under Registration number	37 CFR 1.34(a). er if acting under 37 CFR	. 1.34(a) <u>32,815</u> .			
WARNING: Information on the included on this form. Provide					
December 4, 2003 Date		Signature			<u>=</u>
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NOTE: Signatures of all the inventors or assig forms if more than one signature is required, so		erest or their represe	ntative(s) are requ	uired. S	Submit multiple
☐ Total of forms are sub					

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